



K A N S A S

RODERICK L. BREMBY, SECRETARY

DEPARTMENT OF HEALTH AND ENVIRONMENT

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KDHE STATEMENT REGARDING DISCLOSURE OF IMMUNIZATION INFORMATION

December 2, 2003

The purpose of this statement is to offer clarification on HIPAA rules relating to signed consent forms and disclosure of immunization information.

On August 14, 2002, the final rule for privacy under HIPAA was published in the Federal Register. There were some significant changes in the final rule regarding the need for signed consent forms. The changes were designed to eliminate any barriers to treatment by making consent forms **optional**.

The HIPAA Privacy Rule now allows a provider to share protected health information with another provider for *treatment*:

A covered entity may disclose protected health information for treatment activities of a health care provider. 45 CFR § 164.506(c)(2).

HIPAA also allows a covered entity to disclose protected health information to a public health authority that is authorized by law to collect such information for the purpose of controlling disease, injury, or disability. 45 CFR § 164.512(b).

School nurses, daycare centers/daycare providers, local health departments, physicians and hospitals need immunization information for purposes of providing treatment to the child (making certain that all immunizations are up to date).

The HIPAA Privacy Rule does not preempt any state that provides for reporting for public health purposes. 45 CFR § 160.203(c).

K.S.A. 65-531 allows the disclosure of immunization information and records: *Information and records which pertain to the immunization status of persons against childhood diseases as required by K.S.A. 65-508 and 65-519 may be disclosed and exchanged without a parent or guardian's written release authorizing such disclosure to assure compliance with state statutes or to achieve age appropriate immunization status for children to the following:*

Kansas Immunization Program

Bureau of Epidemiology and Disease Prevention
DIVISION OF HEALTH

Curtis State Office Building, 1000 SW Jackson, Suite 210, Topeka, Kansas 66612-1274

Phone 785-296-5591

Fax 785-296-6510

Website www.kdhe.state.ks.us/immunize

For Disease Reporting and Public Health Emergencies: Toll-Free Phone 1-877-427-7317 Toll-Free Fax 1-877-427-7318

- (1) Employees of public agencies or departments;*
- (2) Health records staff of child care facilities and family day care homes, including, but not limited to, facilities licensed by the secretary of health and environment;*
- (3) Persons other than public employees who are entrusted with the regular care of those under the care and custody of a state agency including, but not limited to, operators of day care facilities, group homes, residential care facilities and adoptive or foster homes;*
- (4) Health care professionals.*

The examples in Attachment A provide guidance for sharing/releasing immunization information in various situations.

Dennis Highberger, Attorney,
Office of the Secretary, HIPAA Co-ordinator

Attachment A

Immunization Data Sharing Scenarios

(1) A child comes into a physician's office for immunizations. The mother reports that the child received the first 3 doses of DTaP from the local health department, but she does not have the record. The physician's office calls the health department and wants the dates of the first three DTaP doses.

It is acceptable for the health department to share the dates of the immunizations with the physician's office without the parent/legal guardian written or verbal consent.

(2) A daycare center/daycare provider or school calls the local health department/physician office requesting a copy of a child's immunization record.

It is acceptable for the health department/physician office to share the immunization record with the daycare center/daycare provider or school without the parent/legal guardian written or verbal consent.

(3) A child comes into a health department for immunizations. The mother reports that the child received the first 2 doses of hepatitis B from the physician, but she does not have the record. The local health department calls the physician's office and requests the dates of the first 2 doses of hepatitis B.

It is acceptable for the physician's office to share the dates of the immunization (or the entire immunization record) with the health department without the written consent of the parent/legal guardian.

(4) A school or daycare center/daycare provider receives a request from a parent/legal guardian, local health department or physician to forward a child's immunization record to the local health department or physician office.

It is acceptable for the school or daycare center/daycare provider to share the immunization record with any of the entities listed without prior written or verbal consent from the parent/legal guardian.

(5) A parent/legal guardian calls the local health department, physician office or school where their child is enrolled and requests that a copy of their child's immunization records be sent to another governmental agency, such as the Women, Infant and Children (WIC) program or the Temporary Assistance for Needy Families (TANF) Program.

It is acceptable for the local health agency or school to share the immunization record with these agencies without prior written or verbal consent from the parent/legal guardian.

(6) A school nurse calls a local health agency/physician requesting the immunization record on a child that is enrolled in or trying to enroll in school.

It is acceptable for the local health agency/physician to share the immunization record with the school nurse without prior written or verbal consent from the parent/legal guardian.